

Under the Paperwork Reduction Act of 1996, no person is required to respond to a collection of information unless it displays a valid OMB control number

|   |  |                          |                        |
|---|--|--------------------------|------------------------|
| <b>Effective on 12/08/2004.</b><br><b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> |  | <b>Complete If Known</b> |                        |
| <b>FEES TRANSMITTAL</b><br><b>For FY 2009</b>   |  | Application Number       | 10/572,588-Conf. #2926 |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27                                    |  | Filing Date              | March 20, 2006         |
| <input type="checkbox"/> TOTAL AMOUNT OF PAYMENT (\$)   |  | First Named Inventor     | Yuzuru ISHIBASHI       |
| <input type="checkbox"/> 940.00   |  | Examiner Name            | D. C. Mellon           |
|   |  | Art Unit                 | 1797                   |
|   |  | Attorney Docket No.      | 0152-0727PUS1          |

**METHOD OF PAYMENT** (check all that apply)

|   |                                      |                                      |                               |  |
|---|--------------------------------------|--------------------------------------|-------------------------------|--|
| <input type="checkbox"/> Check                      | <input type="checkbox"/> Credit Card | <input type="checkbox"/> Money Order | <input type="checkbox"/> None | <input type="checkbox"/> Other (please identify): _____    |
| <input checked="" type="checkbox"/> Deposit Account |                                      | Deposit Account Number: 02-2448      |                               | Deposit Account Name: Birch, Stewart, Kolisch & Birch, LLP |

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

|  |   |
|--|---|
| <input type="checkbox"/> Charge fee(s) indicated below   | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input type="checkbox"/> Credit any overpayments                                  |

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES  |          | SEARCH FEES  |          | EXAMINATION FEES |          |
|------------------|--------------|----------|--------------|----------|------------------|----------|
|                  | Small Entity | Fee (\$) | Small Entity | Fee (\$) | Small Entity     | Fee (\$) |
| Utility          | 330          | 165      | 540          | 270      | 220              | 110      |
| Design           | 220          | 110      | 100          | 50       | 140              | 70       |
| Plant            | 220          | 110      | 330          | 165      | 170              | 85       |
| Reissue          | 330          | 165      | 540          | 270      | 650              | 325      |
| Provisional      | 220          | 110      | 0            | 0        | 0                | 0        |

**2. EXCESS CLAIM FEES**

| Fee Description                                    | Small Entity | Fee (\$) | Fee (\$) |
|--|--------------|----------|----------|
| Each claim over 20 (including Reissues)            |              | 52       | 26       |
| Each independent claim over 3 (including Reissues) |              | 220      | 110      |
| Multiple dependent claims                          |              | 390      | 195      |

| Total Claims   | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims |
|--|--------------|----------|---------------|---------------------------|
| 18   | - 20 or HP   | x        | =             | Fee (\$)                  |
| HP = highest number of total claims paid for, if greater than 20.      |              |          |               | Fee Paid (\$)             |
| Indep. Claims  | Extra Claims | Fee (\$) | Fee Paid (\$) |                           |
| 4  | - 4 or HP =  | x        | =             |                           |
| HP = highest number of independent claims paid for, if greater than 3. |              |          |               |                           |

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(g).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$)                       | Fee Paid (\$) |
|--------------|--------------|--|--------------------------------|---------------|
|              | - 100 =      | /50 =  | (round up to a whole number) x | =             |

**4. OTHER FEE(S)**

|   |  |        |  |
|---|--|--------|--|
| Non-English Specification, \$130 fee (no small entity discount)                     |  |        |  |
| Other (e.g., late filing surcharge): 1251 Extension for response within first month |  | 130.00 |  |

1801 Request for continued examination (RCE) (see 37 ...)

810.00

|                   |               |   |                                   |        |           |                |
|-------------------|---------------|---|-----------------------------------|--------|-----------|----------------|
| SUBMITTED BY      |               | Signature  | Registration No. (Attorney/Agent) | 43,368 | Telephone | (703) 205-8000 |
| Name (Print/Type) | Paul C. Lewis |   |                                   |        | Date      | March 26, 2010 |

